2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 21, 2006 8:00 am
Secretary of State

07-05-2006 90003 030 ***158.75

DOCUMENT # P05000038406

1. Entity Name
VINSON CONSTRUCTION CONSULTING, INC.

Principal Place of Business	Mailing Address
1691 CONDOR DR CANTONMENT, FL 32533	1691 CONDOR DR CANTONMENT, FL 32533

06282006 Chg-P CR2E034 (11/05)

2. Principal Place of Business		3. Mailing Address	
1115 Oak Ridge Trail		1115 Oak Ridge Trail	
Suite, Apt #, etc		Suite, Apt #, etc.	
City & State: Cantonment, FL		City & State: Cantonment, FL	
Zip: 32533	Country: Escambia	Zip: 32533	Country: Escambia

4. FEI Number: 20-2392373 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

VINSON, EDWARD
1691 CONDOR DR
CANTONMENT, FL 32533

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable) 1115 Oak Ridge Trail

City Cantonment FL Zip Code 32533

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Edward R. Vinson (signature) Edward R. Vinson 6/28/06
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
Due by September 6, 2006

9. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PSD VINSON, EDWARD 1691 CONDOR DR CANTONMENT, FL 32533	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PSD Vinson, Edward 1115 Oak Ridge Trail Cantonment, FL 32533	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Edward R. Vinson (signature) Edward R. Vinson, Pres./Sec. 6/28/06 (850)982-9997
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #